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Bib Data Sheet

CONFIRMATION NO. 4324

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|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER 10/668,805 | FILING DATE 09/24/2003 RULE | CLASS 433 | GROUP ART UNIT 3732 | ATTORNEY DOCKET NO. IMP-102 |
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APPLICANTS

Maurice Valen, Holliswood, NY;

** CONTINUING DATA *****

none cos

** FOREIGN APPLICATIONS *****

none cos

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 12/16/2003

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|---|----------|---------|--------|-------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged <i>Candice Stokes</i> Examiner's Signature Initials | NY | 2 | 29 | 3 |

ADDRESS

41245
 MARK LEVY & ASSOCIATES, PLLC
 PRESS BUILDING, SUITE 902
 19 CHENANGO STREET
 BINGHAMTON, NY
 13901

TITLE

Universal, multifunctional, single unit, rotary osteotome

| | | |
|-----------------------------------|---|--|
| FILING FEE RECEIVED 456 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ |
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